

Note: This information is a summary of your benefits. For complete details on limitations & exclusions, please consult your plan document & master contract.

### ★ Life and Accidental Death & Dismemberment

All full-time employees are provided life insurance and accidental death & dismemberment coverage.

<u>Age Under 65 65-69 70-74 75-79 80+</u> Amount \$25,000 \$16,250 \$12,500 \$8,750 \$5,000

The above amounts double in the event of accidental death. Accidental death terminates at retirement.

### ★ Medical Benefits with United Healthcare

Benefits are based on reasonable & customary charges and non-occupational accidents & illnesses

- 1. *\$500 Gold Plan* or *\$1,500 Silver Plan* Calendar Year Deductible (maximum of 3 per family)
- 2. Deductible carryover included for the last 3 months of the calendar year.
- 3. \$25 Platinum/Gold Plan or \$35 Silver Plan Physician office visit co-pay for routine, non emergency care. Non-network services are subject to coinsurance and calendar year deductible.
- 4. *24 Hour Nurse Hotline 1-800-846-4678*. Preventive care: Includes routine physical exams, including immunizations and basic gynecological care. Limit one exam annually for members over the age of 2. Lab and X-ray services are subject to the co-insurance as listed below.
- 5. Prescription Drugs are covered at participating pharmacies with the applicable co-pays of \$10/\$25 Gold Plan or \$15/\$45/\$70 Silver Plan.
- 6. Emergency Room care: \$100 Gold Plan or \$200 Silver Plan Co-pay and may be subject to usual and customary charges.
- 7. Co-insurance: 80%/60% Gold Plan or 70%/30% Silver Plan Out of Pocket Maximum: \$2,000 Gold Plan or \$3,000 Silver Plan Individual (maximum of 3 per family)
- 8. \$2,000,000 major medical lifetime maximum
- 9. Pre-existing conditions apply if you do not have 12 months of creditable coverage prior to your effective date with the City.
- 10. The following services do require Pre-Treatment Authorization: Hospital (including partial hospitalization programs for mental health), Skilled Nursing Facility, Home Health Care, IV Therapy, Renal dialysis, Air Ambulance, Durable Medical Equipment over \$500, High Cost Drugs, High Tech Radiology (examples include CAT Scans, MRIs and PET Scans), Genetic Testing and Trans Plant Evaluations.
- 11. Claims are administered by United Healthcare P.O. Box 30555, Salt Lake City, UT 84130-0555. *Customer Service can be reached at 1-866-663-9238.* Internet based tools such as, review a claim, review and print your benefits or find a provider can be accessed at <a href="https://www.myuhc.com">www.myuhc.com</a>.

### **★** General Information

- Eligible dependents must be added to the plan within 31 days of being eligible (i.e. marriage, newborn, adoption, etc.)
- It is your responsibility to notify the City of Huntsville's Human Resources office of any change in your family status (i.e. marriage, divorce, death, graduation, change of address, phone number, etc.)
- Effective date of coverage is the first day of the month following full-time employment.
- Coverage terminates the last day of full-time employment.

## ★ Dental Benefits with Employer Plan Services, Inc.

Benefits are based on reasonable and customary charges

1. Type I Preventive and Diagnostic Procedures Covered at 100%

Procedures covered at 100% are limited to the following Type I procedures: initial exam, X-rays, periodic exam, and prophylaxis (cleaning). Prophylaxis is limited to two treatments per calendar year. Bitewing X-rays are limited to once every 6 months and full mouth X-rays once every 3 years.

2. Type I Restorative and Surgical Procedures Covered at 80%

These procedures are covered at 80% after satisfaction of the deductible. Examples are as follows:

Restorative: Fillings, extraction, anesthesia, root canals, fluoride, x-rays, space maintainers

Surgical: Gum surgery and removal of cysts and tumors

3. Type II Major Procedures Covered at 50%

After satisfaction of the deductible, major procedures listed in this category are covered at 50%. Examples include: inlays, crowns, bridges, dentures and orthodontic treatment.

### Deductible Requirement

A deductible consisting of the first \$50 of covered expenses incurred by a covered person during a calendar year will be applied before any benefit is payable, except that no deductible will apply to any procedure covered at 100%, and beginning with the placement of appliances, no deductible will apply to orthodontic procedures.

#### Maximum Benefit

\$1000 per person per calendar year maximum for all covered dental charges.

\$1000 per person maximum lifetime benefit for orthodontic treatment.

*NOTE:* Orthodontic services are not covered for dependent children beyond age 19.

This is a summary of your benefits. For details including limitations and exclusions see your Summary Plan Booklet.

# **★** <u>Vision Benefits with Humana</u>

<u>Benefit</u>	Co Pay	<u>Frequency</u>	Annual Max	Comment
Exam	\$10.00	1 per 12 Months		
Materials	\$15.00	1 per 12 Months		
Lens		1 per 12 Months		
Frames		1 per 24 Months	\$80 to \$120	Retail Value
Contacts		\$105 per 12 Months	\$105	Exam& Fitting

# The Health Insurance Portability and Accountability Act of 1996 (HIPAA)

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) imposes certain requirements on group health plans beginning with plan year anniversary dates after June 30, 1997. Other requirements apply beginning with plan year anniversary dates occurring on or after January 1, 1998. HIPAA provides that the plan sponsor of a self-funded non-federal governmental plan may elect to exempt the plan from any or all of the following requirements:

Effective for health plans beginning with plan year anniversary dates after June 30, 1997

- 1. <u>Limitations on pre-existing condition exclusion periods</u>. A pre-existing condition exclusion period may not exceed 12 months, and must be reduced, under certain circumstances, by prior medical benefits coverage an individual has had.
- 2. Special enrollment periods. Group health plans are required to provide a 30-day special enrollment period for individuals and dependents who do not enroll in the plan at the first opportunity because they have other coverage and subsequently lose that coverage. Also, if a plan provides dependent coverage and a person becomes a dependent through marriage, birth, adoption or placement for adoption, the plan must provide a special enrollment period of not less than 30 days.
- 3. Prohibitions against discriminating against individual participants and beneficiaries based on health status. A group health plan may not establish enrollments rules (including continuous eligibility) for an individual based on any of the following health status-related factors: medical condition (physical & mental illnesses), claims experience, receipt of health care, medical history, genetic information, evidence of insurability, and disability.

Effective for health plans beginning with plan year anniversary dates after January 1, 1998

- 4. <u>Standards relating to benefits for mothers and newborns</u>. Group health plans offering health coverage for hospital stays in connection with the birth of a child must provide health coverage for mother and child for a minimum period of time, generally 48 hours for a normal vaginal delivery, and 96 hours for a cesarean section.
- 5. Parity in the application of certain limits to mental health benefits. Group health plans offering mental health benefits may not set annual or lifetime limits on mental health benefits that are lower than limits for medical and surgical benefits. A plan that does not impose an annual or lifetime limit on medical and surgical benefits may not impose a limit on mental health benefits. These requirements do not apply to benefits for substance abuse or chemical dependency.

# Long Term Disability

The City of Huntsville provides a Long Term Disability policy for regular full-time employees with six months of continuous service. Benefits will be paid when an employee is totally disabled for 90 consecutive days. 66 2/3% of your basic monthly salary will be paid to you, with a maximum monthly benefit of \$5,000 coordinated with other benefits. The maximum benefit length is to age 65 for accidents or illnesses (subject to ADEA).

# Additional Life Insurance for Employee, Spouse and Children

- An employee may purchase additional life insurance at their expense from Sun Life. Term life insurance is available to employees and their families as listed below:
- The Optional Maximum Benefit is the lesser of:
  - . \$600,000; or
  - . 5 times the Employee's Basic Annual Earnings.
- The Guaranteed Issue Amounts for Optional Life Insurance are as follows:

### AGE GUARANTEED ISSUE AMOUNT

Under age 60 \$150,000 Ages 60 to 69 \$40,000

Ages 70 to 79 \$20,000

Age 80 or over \$1,000

An Employee's amount of Basic and Optional Life and Basic Accidental Death and Dismemberment Insurance shown in the Schedule will reduce to 65% when he attains age 65, to 50% when he attains age 70, to 35% when he attains age 75 and to 20% when he attains age 80.

- The Dependent Spouse Optional Maximum Benefit is \$250,000
- The Dependent Child Optional Maximum Benefit is \$25,000
- The premium is payroll deductible.
- The rates are subject to change with the insurance market and as the insured's age increases.

Coverage is **not** guaranteed by the City. Determination of eligibility is up to the insurance company.

# **Interface EAP**

The City of Huntsville Employee Assistance Program (EAP) is a confidential service designed to help employees and their immediate family members with problems such as relationships, legal, finances, drug/alcohol, depression or anxiety. Employees and/or immediate family members are allowed six (6) free counseling sessions per issue per year unless long-term care is recommended, then sessions will be applied toward health insurance. Legal assistance consists of three (3) free phone calls with an attorney per year and/or a 25% price discount.

You may contact EAP at 1-800-324-4327. Se habla Espanol, 1-800-324-2490

# 125-K Flexible Compensation Plan "Cafeteria Compensation" Plan Administered by Employer Plan Services, Inc.

The City of Huntsville offers a Cafeteria Compensation Plan under Section 125 of the Internal Revenue Service Code.

- Participation in the plan allows an employee a voluntary choice to have certain employee benefits paid on a "before-tax" basis.
- Eligible deductions are payroll-deducted premiums for dependent medical/dental coverage, and life insurance premiums for *employee only* (not to exceed \$50,000).
- Reimbursement will be available for "qualifying medical care expenses." The maximum reimbursement amount is \$5200 per year.
- Participation in this plan is on an annual basis. Participants may not make changes to their election during the year unless there is a change in family status (i.e. marriage, divorce, death of a spouse or child, birth or adoption of a child, termination of employment of a spouse).
- Expenses deferred which have been accounted for, will not be reported to the IRS as taxable income.